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\*\* CONTINUING DATA \*\*\*\*\* *None* \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *16* \*\*\*\*\*

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**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials				

**ADDRESS**

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**TITLE**

Data communication system, information processing apparatus, information processing method, and program

<b>FILING FEE RECEIVED</b> 942	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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